STARS

School Teacher Account Request Form

Please Print

School Code_____

Phone Number_____

School Name_____

Principal_____

Number of teachers at school (requesting an account)
_____

Last Name	First Name	HQ Domain Username	If existing DC STARS user, provide username*	Email Address XXXX.XXX@dc.gov
Example: *Smith*	*Mary*	*Smithm02*	*Smithm01*	*Mary.Smith@dc.gov*

* If existing DC STARS user, your account will be checked to see if it is associated with the correct school (i.e.: teacher moved from one school to another).

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